Pre-Enrollment 2027-2028

NEW Student Pre-Enrollment

How to Pre-Enroll In DPS

1. **New students to DPS**
   - ❑ Complete the attached Pre-Enrollment form.
   - ❑ Collect your required enrollment documents (see Documentation Checklist below).
   - ❑ Submit Pre-Enrollment form, with required documents, to any DPS school or Choice Enrollment Center
   - ❑ Once your student has been pre-enrolled, you will receive a DPS student ID by email.
2. **Create a Parent Portal account**
   - ❑Visit https://myportal.dpsk12.org/
   - ❑Click "Create an Account".
3. **Participate in Round 1 SchoolChoice from Dec. 1, 2026, 10 a.m. thru Jan. 19, 2027, 4 p.m.**
   - ❑Visit SchoolChoice.dpsk12.org
   - ❑Click "Apply" to participate in Round 1 of SchoolChoice.
   - ❑Sign in using your Parent Portal credentials.
   - ❑Add a new student application.
   - ❑Check for email/text confirmation after submitting your application.

Documentation Checklist

Submit the documents indicated for your student's grade level for your Pre-Enrollment form to be processed.

	REQUIRED DOCUMENTS	
Grade Level In 2027-28	**Proof of Address** *Current utility bill with service address; Valid rental/lease agreement; Warranty deed; Current mortgage statement; Property tax notice; or Signed contract stating your name, closing date and property address*	**Proof of Income** *30 consecutive days of paycheck stubs; 2025 W-2; or letter from employer on company letterhead that states hours worked and pay rate. If applicable, proof of non-work income (TANF, food stamps, child support, etc.)*
ECE-3 must be 3 by Oct. 1, 2027	✓	Household income and household size must be stated in SchoolChoice application.
ECE-4 must be 4 by Oct. 1, 2027	✓	✓
Kindergarten must be 5 by Oct. 1, 2027	Required for students NEW and returning DPS.	Not required.
Grades 1st - 12th	Required for students NEW and returning DPS.	Not required.
All grades	Immunization records will be required for all grades at the time of registration.	

Pre-Enrollment: 2027-2028

NEW Student Pre-Enrollment

1. Student Information

Student's Name

Last First Middle Name ❑No Middle Name

❑**Male** ❑**Female**

Student's Primary Home Address (this address impacts student placement):

Street Apt # City State Zip

Birthdate: (mm/dd/yyyy) **Current Age:** **Current Grade:**

/ /

ETHNICITY/RACE (new students only)

This information is required by federal law. Failure to answer questions will result in use of prior racial/ethnic data or an observer identifying for you.

Is your student Hispanic or Latino? ❑Yes ❑No

Race (select all that apply)**:** ❑American Indian or Alaskan Native ❑Asian ❑Black or African American ❑Native Hawaiian or Pacific Islander ❑White

PREVIOUS SCHOOL INFORMATION

Where is student currently enrolled? School Name: _____ Grade: _____ City, State: _____

Has the student previously attended a DPS school? ❑Yes ❑No

DPS School: _____ Grade: _____ School Year: _____

2. Grade in 2027-28

❑**ECE 3** ❑**ECE 4** ❑**Kindergarten** ❑**1st** ❑**2nd** ❑**3rd** ❑**4th** ❑**5th** ❑**6th** ❑**7th** ❑**8th** ❑**9th** ❑**10th** ❑**11th** ❑**12th**

3. Parent/ Guardian Contact Information

First Parent/Guardian's Name **Relationship to Student** **Legal Guardian?** ❑**Yes** ❑**No**

In case of an emergency, contact the person above ❑First ❑Second

Primary Contact Phone Number: ❑Home ❑Cell ❑Work

***Txt (SMS):** **E-mail:**

*Message and data rates may apply based on your wireless carrier's rate plan. By selecting text message as a contact preference, you consent to receiving recorded automated calls and/or text messages on the mobile phone number you provided.

Parent/Guardian's home address, if different than student's home address

Street Apt # City State Zip

Second Parent/Guardian's Name **Relationship to Student** **Legal Guardian?** ❑**Yes** ❑**No**

In case of an emergency, contact the person above ❑First ❑Second

Primary Contact Phone Number: ❑Home ❑Cell ❑Work

***Txt (SMS):** **E-mail:**

*Message and data rates may apply based on your wireless carrier's rate plan. By selecting text message as a contact preference, you consent to receiving recorded automated calls and/or text messages on the mobile phone number you provided.

Parent/Guardian's home address, if different than student's home address

Street Apt # City State Zip

4. Siblings *Only list siblings who reside at the same address and attend DPS.*

Sibling Name (Last, First MI):	Student ID #:	Gender:	Grade:	School Name:

5. Parent Signature *Parent/legal guardian signature is required to process this Pre-Enrollment form.*

By signing this Pre-Enrollment form, I affirm that all information submitted on this form is accurate to the best of my knowledge. I understand that DPS reserves the right to attempt to verify information and documents submitted.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ **Date:** _____

WELCOME TO DENVER PUBLIC SCHOOLS (DPS)

In order to best support your student with the appropriate services, it is very important that you answer all questions accurately and to the best of your ability. Once you have completed this form, please submit to a Denver Public Schools staff member.

HOME LANGUAGE QUESTIONNAIRE

Student's Full Legal Name: _____
Last *First* *Middle*

Current Grade: _____ Birthdate: _____/_____/_____
Month *Day* *Year*

1) What is the primary language used in the home, regardless of the language spoken by the student?

○ English	○ French	○ Somali	○ Arabic
○ Spanish	○ Nepali	○ Amharic	○ Khmer
○ Russian	○ Karen	○ Burmese	○ Vietnamese
○ Chinese, Mandarin	○ Tigrigna	○ Other - please specify: _____	

2) What is the language most often spoken by the student?

○ English	○ French	○ Somali	○ Arabic
○ Spanish	○ Nepali	○ Amharic	○ Khmer
○ Russian	○ Karen	○ Burmese	○ Vietnamese
○ Chinese, Mandarin	○ Tigrigna	○ Other - please specify: _____	

3) What is the language that the student first acquired?

○ English	○ French	○ Somali	○ Arabic
○ Spanish	○ Nepali	○ Amharic	○ Khmer
○ Russian	○ Karen	○ Burmese	○ Vietnamese
○ Chinese, Mandarin	○ Tigrigna	○ Other - please specify: _____	

4)

★ _____
*Signature of Person Completing Form**

_____/_____/_____
Date

_____
Relationship to Student

**By signing on this line using the e-signature format (/John T. Smith/), I certify that I am the parent/guardian of _____ and am agreeing to use an electronic signature.*

SCHOOL USE ONLY – Steps to follow:

1) Date received: _____/_____/ _____
2) Received by:_____ School Number:_____
3) Date entered in Infinite Campus: _____/_____/ _____
4) Scan and upload HLQ (page 1) into Infinite Campus, with naming convention: School ID#, "HLQ", Student ID# (i.e. 450HLQ712345)
5) Date scanned: _____/_____/ _____